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THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. 016754-0206

Applicant: David M. ANDERSON *et al.*

Title: ENZYME TREATMENT

Appl. No.: 09/731,971

Filing Date: December 08, 2000

Examiner: Manjunath N. Rao

Art Unit: 1652

AMENDMENT TRANSMITTAL

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.
- [] Small Entity statement is enclosed.
- [X] The fee required for additional claims is calculated below:

| | Claims as Amended | Previously Paid For | Extra Claims Present | Rate | Additional Claims Fee |
|--|-------------------------|------------------------|----------------------------|-------------------|--------------------------|
| Total Claims: | 53 | — | 20 | = 33 | x \$18.00 = \$594.00 |
| Independents: | 4 | — | 3 | = 1 | x \$84.00 = \$84.00 |
| First presentation of any Multiple Dependent Claims: | | | | + \$280.00 | = \$0.00 |
| | | | | CLAIMS FEE TOTAL: | = \$678.00 |

- [X] Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

| | | | |
|-------------------------------------|---|------------|----------|
| <input checked="" type="checkbox"/> | Extension for response filed within the first month: | \$110.00 | \$110.00 |
| <input type="checkbox"/> | Extension for response filed within the second month: | \$400.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the third month: | \$920.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fourth month: | \$1,440.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fifth month: | \$1,960.00 | \$0.00 |
| | EXTENSION FEE TOTAL: | | \$110.00 |
| | CLAIMS AND EXTENSION FEE TOTAL: | | \$788.00 |
| <input type="checkbox"/> | Small Entity Fees Apply (subtract ½ of above): | | \$0.00 |
| | TOTAL FEE: | | \$788.00 |

- A Supplemental Information Disclosure Statement and fee in the amount of \$180.00 is enclosed.
- A check in the amount of \$968.00 is enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By S.A. Bent

Date 22 November 2002

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